

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>Thur</i>	62844	<i>Chellow</i>
O.I.P.E. CLASSIFIER	<i>7/8</i>	14490	<i>6/20</i>
FORMALITY REVIEW			
RESPONSE FORMALITY REVIEW			<i>7-28-00</i>

## INDEX OF CLAIMS

✓ ..... Rejected  
 = ..... Allowed  
 - (Through numeral) ... Canceled  
 ÷ ..... Restricted

N ..... Non-elected  
 I ..... Interference  
 A ..... Appeal  
 O ..... Objected

Claim	Final	Original	Date
1	✓	✓	7/22/94
2	✓	✓	7/22/94
3	✓	✓	7/22/94
4	✓	✓	7/22/94
5	✓	✓	7/22/94
6	✓	✓	7/22/94
7	✓	✓	7/22/94
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15	✓	✓	7/22/94
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17	✓	✓	7/22/94
18	✓	✓	7/22/94
19	✓	✓	7/22/94
20	✓	✓	7/22/94
21	✓	✓	7/22/94
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If more than 150 claims or 10 actions  
staple additional sheet here

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